

Montana Law Enforcement Academy LEO Basic Course Medical Waiver

Applicant's Name:	Date of Birth:
Social Security Number:	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%; padding: 5px;">Age:</div> <div style="width: 45%; padding: 5px;">Gender:</div> </div>

This is to certify that I have read the preceding physical fitness skills testing criteria, and I am not aware of any physical or medical reasons that would prohibit me from participating in these physical fitness skills tests. I am comfortable that I can participate in the physical fitness skills testing without causing injury to myself by my participation in this strenuous activity.

I have taken ample opportunity to discuss my participation in the physical fitness skills testing with my physician and have advised him/her of any and all physical or medical conditions that I may know of that may prevent me or cause me injury or illness from participating in the preceding physical fitness skills testing.

Applicant's Signature:	Date of Signature:
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This is to certify that the above named person, _____, hereinafter referred to as applicant is capable of strenuous physical exercise and is physically capable of attempting and participating in the preceding physical fitness skills testing as detailed in the 30th percentile scoring range as indicated based upon the applicants age and gender.

I have inquired and been advised by the applicant that there are no known physical and medical condition that may cause undue injury and illness from the applicants participation in this physical fitness skills testing.

I am placing the following limitations on the applicant's participation. *(Must check one of the following)*

- ☐ – None
☐ – As follows, including allergies and current prescription medicines:

Physician's Printed Name:	Telephone Number:
Address:	City, State, Zip:
Signature:	

Montana Law Enforcement Academy Use Only!	ENTRY LEVEL TEST DATE & SITE			
	TEST PROCTOR			
	PUSH-UPS			
	SIT-UPS			
	SIT & REACH			
	1.5 MILE RUN			
	30%		PASS	FAIL

!!!! NOTICE !!!!

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THIS FORM MUST BE COMPLETED IN FULL AND PRESENTED AT THE TIME OF TESTING. FAILURE TO PRESENT THIS FORM AT THE DESIGNATED DATE, TIME, AND SITE WILL DISQUALIFY YOU FROM PARTICIPATING!

Applicants must present the Medical Release Form and Waiver at the date, time, and site of the examination. If the Medical Release Form and Waiver is not complete or the applicant does not have the form with them at the time of the examinations, the applicant will not be permitted to participate in the examinations. The Physical Fitness Examinations consists of the following series of activities.

Sit-Up Test

The individual starts by lying on his/her back, knees bent, heels flat on the floor with the hands cupped behind the head and ears. In the up position, the individual shall touch his elbows to his knees and then return back to the lying position until the shoulder blades touch the floor. This shall be continued repetitively for one minute. The individual's score shall consist of the total number of complete sit-ups in one minute.

Push-Up Test

The individual starts in the prone position, with the palm of the hands directly under the shoulders and arms extended. The feet are together with toes touching the floor. The individual's back and legs are rigid and in line from heels to shoulder blades and to the back of the head. The individual starts in the up position and lowers his/her body towards the floor with back straight and rigid until the chest touches the pushup block and then pushes back up to the start position. This shall be continued repetitively for one minute. The individual's score shall consist of the total number of complete push-ups in one minute.

Modified Push-Up Test (optional only for females)

The individual starts with knees on the floor and ankles crossed, toes on the floor, with the palm of the hands directly under the shoulders and arms extended. The individual's shoulders, hips, and knees are in line. The individual starts in the up position and lowers her body towards the floor with back straight and rigid until the chest touches the pushup block and then pushes back up to the start position. This shall be continued repetitively for one minute. The individual's score shall consist of the total number of complete modified push-ups in one minute.

Sit and Reach

The individual sits on the floor with legs extended at right angles on a box. The feet are placed squarely against the box with no wider than eight inches apart. A yardstick is placed between the legs of the individual and rests on the box with the 15' mark flush with the edge of the box. The subject slowly reaches forward with both hands as far apart as possible without bending the knees and holds the position for one second. The best of three trials is recorded as the score. The score is the inches reached on the yardstick with 15" being at the toes.

1.5-Mile Run

This is a timed run. Individual will run the prescribed 1.5-mile course in the least amount of time possible. Score is determined by actual minutes and seconds recorded from the time of the start of the run to the prescribed finish line.

Passing scores are indicated below based upon the range of your age and gender.

MALES AGE	< 20	20-29	30-39	40-49	50-59	60 >	FEMALES AGE	< 20	20-29	30-39	40-49	50-59	60 >
							MODIFIED PUSH-UPS	20	20	15	10	9	3
PUSH-UPS	26	26	20	15	10	8	PUSH-UPS	13	13	9	7		
SIT-UPS	38	35	32	27	21	17	SIT-UPS	30	29	22	17	12	4
SIT & REACH	15.5	15.5	14.5	13.3	12.0	11.3	SIT & REACH	19.5	18.3	17.3	16.5	15.5	14.4
1.5 MILE RUN	13:08	13:08	13:48	14:33	16:16	18:39	1.5 MILE RUN	15:56	15:56	16:46	18:26	20:17	22:34